



RCE/B

**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. 1450
Alexandria, VA 22313-1450

Application No.	09/945,414
Filing Date	August 31, 2001
First Named Inventor	Tom R. Vandermeijden
Art Unit	2645
Examiner Name	Elahee, MD S.
Attorney Docket Number	3399P066

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.
Request for Continued Examination (RCE) practice under 37 CFR § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on
- ii. ☐ Other _____
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- iii. ☒ Information Disclosure Statement (IDS)
- ii. ☐ Affidavit(s)/Declaration(s)
- iv. ☐ Other _____
2. **Miscellaneous**
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other _____
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet.
- i. ☒ RCE fee required under 37 CFR 1.17(e) and any additional claims fee(s)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other: (\$00) _____
- b. ☒ Check in the amount of \$790.00 enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)
- WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Jordan M. Becker	Registration No. (Attorney/Agent)	39,602
Signature		Date	December 7, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

December 7, 2005

Name (Print/Type)	Julie Arango	Date	December 7, 2005
Signature			

Based on PTO/SB/30 (04-05) as modified by Bakely, Solokoff, Taylor & Zalman (wir) 11/30/2005.
SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

12/12/2005 EAREGAY1 00000088 09945414

01 FC:1801

790.00 OP



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/945,414
Filing Date	August 31, 2001
First Named Inventor	Tom R. Vandermeijden
Examiner Name	Elahee, MD.S.
Art Unit	2645
Attorney Docket No.	3399P066

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 790.00

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
70	70	0	50.00
5	5	0	200.00

Multiple Dependent

Large Entity	Small Entity
Fee Code	Fee Code
1202 50	2202 25
1201 200	2201 100
1203 360	2203 180
1204 300	2204 150
1205 300	2205 150

SUBTOTAL (1) (\$) 0.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity
Fee Code	Fee Code
1051 130	2051 65
1052 50	2052 25
2053 130	2053 130
1251 120	2251 60
1252 450	2252 225
1253 1,020	2253 510
1254 1,590	2254 795
1255 2,160	2255 1,080
1401 500	2401 250
1402 500	2402 250
1403 1,000	2403 500
1451 1,510	2451 1,510
1460 130	2460 130
1807 50	1807 50
1806 180	1806 180
1809 790	1809 395
1810 790	2810 395

Other fee (specify)

SUBTOTAL (2)

(S) 790.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Jordan M. Becker

Registration No. (Attorney/Agent)

39,602

Telephone

(408) 720-8300

Signature

Date

12/07/05